TRANSMITTAL OF FINANCIAL REPORTS AND CERTIFICATION OF COMPLIANCE WITH UNITED STATES TRUSTEE OPERATING REQUIREMENTS FOR THE PERIOD ENDED DECEMBER 31, 2021

In re:

COMMUNITY MEMORIAL HOSPITAL, d/b/a CHEYBOYGAN MEMORIAL HOSPITAL

Case No: 12-20666-dop

Chapter 11

Hon. Daniel S. Opperman

As Chapter 11 Liquidation Trustee, I affirm:

1. That I have reviewed the financial statements attached hereto, consisting of:

Operating Statement

Balance-Sheet

Summary of Operations

Monthly Cash Statement

Accounts Payable Aging

Accounts Receivable Aging

Bank Account Statement

and that they have been prepared in accordance with the normal and customary accounting practices, and fairly and accurately reflect the debtor's financial activity for the period stated;

- 2. That the insurance as described in Section 4 of the Operating Instructions and Reporting Requirements For Chapter 11 Cases is no longer in effect given that the business assets were sold in April 2012;
- 3. That all post petition taxes as described in Sections 1 and 14 of the Operating Instructions and Reporting Requirements for Chapter 11 cases are current;
- No professional fees (attorney, accountant, etc.) have been paid without specific court authorization.

I hereby certify, under penalty of perjury, that the information provided herein is true and

5. All United States Trustee Quarterly fees have been paid and are current.

correct to the best of my information and belief.

A Brooks Darling, Liquidation Trustee

412 S Union St

Traverse City, MI 49686

(231) 941-3446

Community Memorial Hospital, dba Cheyboygan Memorial Hospital; Case # 12-20666 Operating Statement (P & L)

For the Month Ending December 31, 2021

	Current Period	Total since July 2013
Total Operating Revenue	\$ -	\$ 4,227
Cost of Sales	\$ -	\$ -
Gross Profit	\$ -	\$ 4,227
Expenses		
Salaries	\$ -	\$ -
Contract Labor		3,971
Other		23,076
Professional Fees	-	=-,
Purchased Services	(FA)	•
Supplies	•	<u>-</u>
Parts and Repairs	-	-
Utilities		3,164
Depreciation	-	and the second second
Interest	-	¥
Provider Tax	-	ž
Benefits	•	-
Provision for Bad Debt	i i	
Insurance	:•	2,713
Bank Service Charges		464
Total Expenses	\$ -	\$ 33,389
Net Operating Profit/(Loss)	\$ -	\$ (29,162)
Add: Non-Operating Income:	·	Dia Solvenia
Interest/Dividend Income Other Income	\$ -	\$ 1,825
Total Other Income		7,042
	\$ -	\$ 8,867
Less: Non-Operating Expenses:		
Professional Fees	\$ -	\$ -
Loss on Sale of Assets	\$ -	\$ -
Michigan Business Tax		
Adequate Protection Payments		標
Trustee Bond Expense	-	0 = 0
Other (U S Trustee Fee)	-	
Total Other Expenses	<u>\$ -</u>	\$ -
Net Income/(Loss)	\$ -	\$ (20,295)

Form 2

Community Memorial Hospital, dba Cheyboygan Memorial Hospital; Case # 12-20666 Monthly Cash Statement

2000000			30.1			
E	or the	Month	Ending	December	31	2021
	or tric	MINISTER	Lituing	Decelline	UI,	4041

Cash Activity Analysis

Beginning	Ra	anna
Degnining	wa.	ance

Receipts/Deposits Transfers from other Accounts Proceeds from additional borrowings Balance Available

Disbursements Transfers to other Accounts

Ending Balance

Account Information

T	QUIDATING 'RUSTEE'S ACCOUNT		
	ACTIVITY		
\$	487,211.03	\$	-
	-		-
	(*)		()-
	•		•
\$	487,211.03	\$	105
	400.00		-
	**	i	-
\$	486,811.03	\$	

\$ \$ \$	487,21	11.0 - - -
\$ \$	487,21	11.0
\$	486,81	-

Liquidating Trustee's Account: Mechanics Bank Acct # *****7566-Checking Account

A. Brooks Darling, Liquidating Trustee

Form 5

CMH Liquidating Trust Account QuickReport

As of December 31, 2020

Туре	Date	Num	Name	Memo	Split	Debit	Credit	Balance
Mechanics Bank Check	12/31/2020	EFT	Rabobank, N.A.	5	i. All expenses		400.00	487,211.03 486,811.03
Total Mechanics Bank						0.00	400.00	486,811.03
OTAL						0.00	400.00	486,811.03



Santa Maria, CA 93456-6010
Return Service Requested



Period Covered: December 01, 2020 - December 31, 2020 Page 2 of 6

A. Brooks Darling 412 South Union Traverse City MI 49684 Case Number Case Name Trustee Number Trustee Name

01 CMH LIQUIDATING TRUST 0000420193 A. Brooks Darling

Questions
(800) 634-7734
banking.services@stretto.com
www.stretto.com

TRU	STEE CHECKING			V		Account Number: 566
Enclos Avg Co	ollected Balance		\$4	0 91,415.00	Beginning Balance + Total Additions - Total Subtractions Ending Balance	\$491,428.32 \$0.00 \$400.00 \$491,028.32
Date 12-31	Description BANK & TECH FEE					Subtractions 400.00
Daily	Balances					
Date 11-30		mount 1,428.32			Amount 491,028.32	

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CMH Liquidating Trust Reconciliation Detail

Mechanics Bank, Period Ending 12/31/2020

Туре	Date	Num	Name	Cir	Amount	Balance
	nce ransactions and Payments - 1 is	om.				491,428.32
Check	12/31/2020	EFT	Rabobank, N.A.	х	-400.00	-400.00
Total Ch	necks and Payments				-400.00	-400.00
Total Cleare	ed Transactions				-400.00	-400.00
Cleared Balance					-400.00	491,028.32
	Transactions and Payments - 1 it	em				
Paycheck	12/22/2014	364	Manuel Duron	(9 <u></u>	-4,217.29	-4,217.29
Total Ch	ecks and Payments			-	-4,217.29	-4,217.29
Total Uncle	ared Transactions			/	-4,217.29	-4,217.29
Register Balance	as of 12/31/2020			_	-4,617.29	486,811.03
Ending Balance				V2	-4,617.29	486,811.03